1,18,23,25,36,28,42

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10647960

				001		00						
		CLAIMS AS	Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			43				Γ	RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		B	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			43 minus 20=		* 23			X\$ 9=		OR	X\$18=	414
INDEPENDENT CLAIMS			7 m	inus 3 =	* 4			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM P			RESENT				1	.140		1	+280=	
* If	the difference	in column 1 is	ess than zero, enter "0" in column			column 2	L	+140=		OR		1 < 0.0
CLAIMS AS AMENDED - PART II							TOTAL		OR	TOTAL	1,500	
	C	(Column 1)	(Column 2) (Column 3					SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	311	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=	
	(Column 1) (Column 2) (Column 3)							TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
								JOI 1 LE				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAINA	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
							ΑĽ	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	-	(Colur		(Column 3)						
AMENDMENT C	6 H	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		·	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM					OR		
*	If the entry in colu	mn 1 is less than t	he entry in colu	umn 2 write	• "0" in co	olumn 3.	L	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	ent) is the	e highest number	r foun	d in the app	propriate box	c in col	lumn 1.	